



SUP #2017-0031

## Administrative Special Use Permit Application

PROPERTY LOCATION: 301 S. Washington Street, Alexandria, VA 22314

ZONE: CD TAX MAP REFERENCE: 075-01-02-20

### APPLICANT'S INFORMATION:

A Great Massage, LLC

Applicant: JuanHong Chen Business/Trade Name:

Address: 301 S. Washington Street, Alexandria, VA 22314

Phone: (615) 663-0098

Email: Mrchenso@yahoo.com

### PROPOSED USE:

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

Day Care Center  
Light Auto Repair  
Overnight Pet Boarding  
Outdoor Garden Center  
Catering Business  
Valet Parking

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input checked="" type="checkbox"/>

Restaurant  
Outdoor Dining (exclude King Street Retail  
Live Theater  
Outdoor Food and Crafts Market Center  
Outdoor Display  
Massage Establishment

### Please read and sign after the statement:

I have read and understand the general standards and the requirements for the use for which I am applying and have attached the Worksheet for the use.

Signature: JuanHong Chen

### Please submit the following with this application form:

Site Plan - At a minimum, show and label the subject property, surrounding buildings, and streets. Show, label and give dimensions for all parking spaces, entrances and exits, and trees and shrubbery.

Floor Plan - At a minimum, show and label all interior features inside and outside seats, tables, counters, equipment, etc. as appropriate to the use. Show, label and give dimensions for all entrance and exit doors and windows, rooms/areas, staircases, elevators and bathrooms.

Worksheet for specific use from Checklist and Worksheet package.

## PROPERTY OWNER'S AUTHORIZATION

As the property owner, I hereby grant the applicant use of the ground floor of 301 S. Washington Street (property address), for the purposes of operating a professional massage establishment (use) business as described in this application.

I also grant permission to the City of Alexandria to visit, inspect, photograph and post placard notice on my property.

Name: Peter Berk Phone: (703) 752-4920

Address: 1660 N. Quinn Street, Arlington, VA 22209 Email: peter.berk@avisonyoung.com

Signature: Peter Berk, 301 S. WASHINGTON, LLC Date: 11/22/17

1. The applicant is the (check one):

- ☐ Owner  
☐ Contract Purchaser  
☒ Lessee or  
☐ Other: \_\_\_\_\_

of the subject property.

State the name, address and percent of ownership of any person or entity owning an interest in the applicant or owner, unless the entity is a corporation or partnership, in which case identify each owner and the percent of ownership.

A Great Massage, LLC. Owner: JuanHong Chen (100% Ownership)

We will be providing deep tissue massage, reflexology and sports massage by appointment.

If property owner or applicant is being represented by an authorized agent such as an attorney, realtor, or other person for which there is some form of compensation, does this agent or the business in which the agent is employed have a business license to operate in the City of Alexandria, Virginia?

☐ Yes. Provide proof of current City business license

☐ No. The agent shall obtain a business license prior to filing application, if required by the City Code.

## USE CHARACTERISTICS

2. Please give a brief statement describing the use:

We will only be providing deep tissue, reflexology and sports massage for relaxation and sports injuries.

3. Please describe the proposed hours of operation:

Days	Hours
Daily	10:30 am - 9:30 pm

Or give hours for each day of the week

Monday	X
Tuesday	X
Wednesday	X
Thursday	X
Friday	X
Saturday	X
Sunday	X

4. Please describe the capacity of the proposed use:

- A. How many patrons, clients, pupils and other such users do you expect? Specify time period (i.e., day, hour, or shift).

Up to ten (10) clients per day.

- B. How many employees, staff and other personnel do you expect? Specify time period (i.e., day, hour, or shift).

2 employees

5. A. How many parking spaces of each type are provided for the proposed use:

4 \_\_\_\_\_ Standard and compact spaces  
 1 \_\_\_\_\_ Handicapped accessible spaces  
 0 \_\_\_\_\_ Other

B. Please give the number of:

Parking spaces on-site 5

Parking spaces off-site 0

If the required parking will be located off-site, where will it be located?

The only off-site parking is available street parking and/or nearby parking garages, but five (5) spaces are reserved for use by A Great Massage, LLC in the building's parking lot.

6. Please provide information regarding loading and unloading for the use:

A. How many loading spaces are available for the use?

N/A

B. Where are off-street loading spaces located?

N/A

C. During what hours of the day do you expect loading/unloading operations to occur?

N/A

D. How frequently are loading/unloading operations expected to occur per day or per week?

N/A

7. If any hazardous materials or organic compounds (for example paint, ink, lacquer thinner, or cleaning or degreasing solvent), as defined by the state or federal government, will be handled, stored, or generated on the property, provide the name, monthly quantity, and specific disposal method below:

N/A

APPLICANT'S SIGNATURE

Please read and initial each statement:

Initial: \_\_\_\_\_ THE UNDERSIGNED, hereby applies for a Special Use Permit in accordance with the provisions of Article XI, Section 11-500 of the 1992 Zoning Ordinance of the City of Alexandria, Virginia.

Initial: \_\_\_\_\_ THE UNDERSIGNED, hereby attests that all of the information herein provided and specifically including all surveys, drawings, etc., required to be furnished by the applicant are true, correct and accurate to the best of their knowledge and belief. The applicant is hereby notified that any written materials, drawings or illustrations submitted in support of this application and any specific oral representations made to the Director of Planning and Zoning on this application will be binding on the applicant unless those materials or representations are clearly stated to be non-binding or illustrative of general plans and intentions, subject to substantial revision, pursuant to Article XI, Section 11-207(A)(10), of the 1992 Zoning Ordinance of the City of Alexandria, Virginia.

**JuanHong Chen**

Print Name of Applicant or Representative

JuanHong Chen  
Signature

1/23/2017  
Date

If this application is being filed by someone other than the business owner (such as an agent or attorney), please provide the information below:

Representative's Address:

Phone: 615-663-0098

Email: Mrchens@yahoo.com

Fax: \_\_\_\_\_

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**COMMONWEALTH OF VIRGINIA**  
DEPARTMENT OF HEALTH PROFESSIONS

*David E. Brown, D.C., Director*

*Jay P. Douglas, MSM, RN, CSAC, FRE*  
*Executive Director*  
*(804) 367-4515*

**Board of Nursing**

*9960 Mayland Drive, Suite 300*  
*Henrico, VA 23233-1463*  
*www.dhp.virginia.gov/nursing*

**License to Practice as a Massage Therapist**

**QiaoXia Lin**

Expires  
03/31/2018

License to be posted in public area of practice location  
pursuant to 18 VAC 90-50-20(C)

Number  
0019015264

For Information About This License, visit our website: [www.dhp.virginia.gov](http://www.dhp.virginia.gov)  
To File a Complaint About a Licensee, Call: 1-800-533-1560

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*9960 Mayland Drive, Suite 300*  
*Henrico, VA 23233-1463*  
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**License to Practice as a Massage Therapist**

**JuanHong Chen**

Expires  
12/31/2019

License to be posted in public area of practice location  
pursuant to 18 VAC 90-50-20(C)

Number  
0019015243

For Information About This License, visit our website: [www.dhp.virginia.gov](http://www.dhp.virginia.gov)  
To File a Complaint About a Licensee, Call: 1-800-533-1560

Google

301 S Washington St

THE BUILDING AT THE S WASHINGTON ST AND THE DUKE STREET . *we use first floor.*

图像 © 2017 Google , 地图数据 © 2017 Google 50 英尺



301 S Washington St

Alexandria, VA 22314



本地热门场所

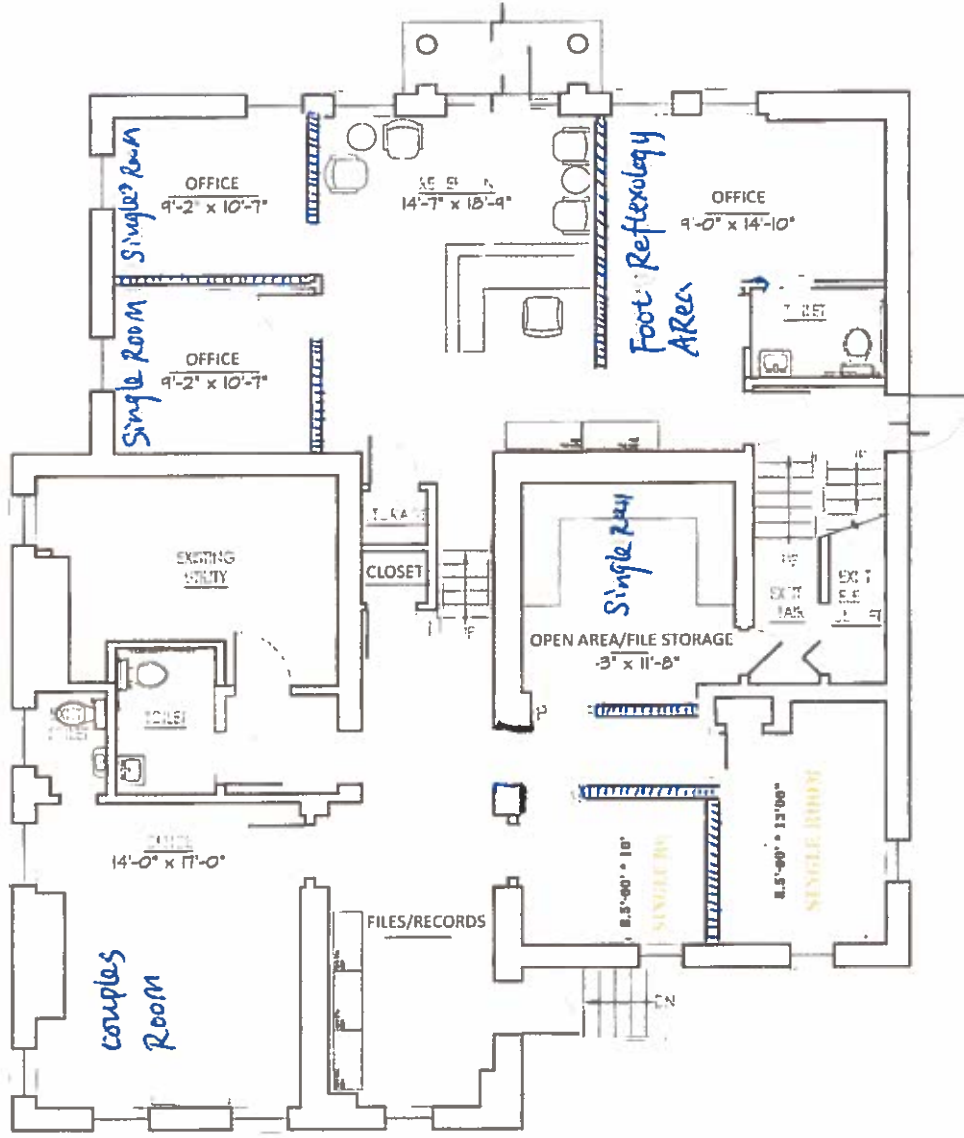
Century National

银行 · 301 S Washington St









# NOTES

 New Wall

 Existing Wall

----- NEW WALL CONNECTED TO THE CEILING. CONSTRUCT WITH METAL STUDS AND GYPSUM BOARD,

----- ONLY BUILD SOME WALL, NOT ANY OTHER CHANGE



**A GREAT MASSAGE LLC**  
 301 S WASHINGTON STREET, ALEXANDRIA, VA  
 NRCHENSE@YAHOO.COM



**VALENTINA ARCHINC**  
 VALENTINAARCHINC@GMAIL.COM